




ZZW  
AFB

| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES   |   | Docket Number<br>2551-1001 |                                  |   |                                    |          |  |          |                                     |            |  |            |
|---|---|----------------------------|----------------------------------|---|------------------------------------|----------|--|----------|-------------------------------------|------------|--|------------|
| Applicant(s): Roberto VILLA et al.  | Conf.: 4029                                 |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| Application #: 10/009,532   | Filed: December 12, 2001                    |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| Title: CONTROLLED RELEASE AND TASTE MASKING ORAL PHARMACEUTICAL COMPOSITIONS  |   |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| Group Art Unit: 1615  | Examiner: Humera N. Sheikh                  |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| <p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner dated <b>January 11, 2006</b> rejecting the following claims: <b>1-14 and 20</b>.</p> <p>The fee for this Notice of Appeal is: \$500.00</p> <p>If I have checked one of the boxes below, then this is also a petition for an extension of time under 37 CFR 1.136(a) to reply to the rejection:</p> <table><thead><tr><th>Extension of time requested for:</th><th>Non-small entity fee for extension of time:</th></tr></thead><tbody><tr><td><input type="checkbox"/> - 1 Month</td><td>\$120.00</td></tr><tr><td><input checked="" type="checkbox"/> - 2 Months</td><td>\$450.00</td></tr><tr><td><input type="checkbox"/> - 3 Months</td><td>\$1,020.00</td></tr><tr><td><input type="checkbox"/> - 4 Months (if available)</td><td>\$1,590.00</td></tr></tbody></table> <p>The sum of the fee for the Notice of Appeal and the fee for any extension of time is: \$950</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$475</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 25-0120. I have enclosed a duplicate copy of this sheet.</p> <p>Respectfully submitted,</p> <p>YOUNG &amp; THOMPSON</p> <p><br/>Philip Dubois, Reg. No. 50,696<br/>745 South 23<sup>rd</sup> Street<br/>Arlington, VA 22202<br/>Telephone (703) 521-2297<br/>Telefax (703) 685-0573<br/>(703) 979-4709</p> <p>PD/lrs<br/>June 12, 2006</p> |   |                            | Extension of time requested for: | Non-small entity fee for extension of time: | <input type="checkbox"/> - 1 Month | \$120.00 | <input checked="" type="checkbox"/> - 2 Months | \$450.00 | <input type="checkbox"/> - 3 Months | \$1,020.00 | <input type="checkbox"/> - 4 Months (if available) | \$1,590.00 |
| Extension of time requested for:  | Non-small entity fee for extension of time: |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| <input type="checkbox"/> - 1 Month  | \$120.00                                    |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| <input checked="" type="checkbox"/> - 2 Months  | \$450.00                                    |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| <input type="checkbox"/> - 3 Months   | \$1,020.00                                  |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |
| <input type="checkbox"/> - 4 Months (if available)  | \$1,590.00                                  |                            |                                  |   |                                    |          |  |          |                                     |            |  |            |

06/13/2006 RFEKADU1 00000028 10009532

01 FC:2252

225.00 0P

06/13/2006 RFEKADU1 00000028 10009532

250.00 0P

02 FC:2401